

# Essex Place Apartments

## INFORMATION FOR CO-SIGNERS

*Below is some information we have gathered to help ensure that some common questions are answered.*

### **In order for your student to apply:**

- All students must fill out the first two pages of an application.
- All co-signers must fill out all pages of a separate application, and provide copies of their last 3 pay stubs or W-2 tax form, along with a copy of a driver's license.
- We will need a personal check for an application fee & hold fee.

### **Application Fee:**

It is \$80.00 for a student to apply with a co-signer. (\$40.00 per application). Checks can be made payable to SANDY BROOK LLC.

### **Hold Fee:**

A holding deposit in the amount of \$100.00 is required by each student in order to secure an apartment. *This fee is deducted from your move in cost.*

### **Utilities:**

Cold/Hot water, Direct TV, trash pick-up, and *\*Wireless Internet* are included. All tenants of the apartment will be responsible for an electric bill through CL&P. Heat and Central Air are electric.

### **Amenities:**

Roof deck, nightly concierge service, fitness center, secured building access.

### **Parking:**

Each apartment will receive TWO parking passes. There is gated parking available. We can issue up to 2 guest passes per apartment daily on a first come first serve basis.

### **Roommates:**

There is a maximum of three roommates per apartment. Every student is required to have a co-signer.

### **Security Deposit:**

All apartments leased by undergraduate students are required to hold a two-month security deposit. This will be collected after lease approval.

### **WHAT NEXT?**

After we receive applications and associated fees from every student and their respective co-signer, we will call you upon approval to set up lease signing and make you aware of the amount of rent and security deposit for move in.

**Don't hesitate to call our office with any further questions! (860) 225-2525**

\*Please note that we do not offer 24/7 tech support with our internet service. Please also be aware that computers must be equipped with a "wireless internet card" to access our network.

# ESSEX PLACE APARTMENTS

1317 East Street  
New Britain, CT 06053  
(860) 225-2525

Apt. # \_\_\_\_\_  
Rent: \_\_\_\_\_  
M/I Date: \_\_\_\_\_  
App. Fee: \_\_\_\_\_ Ck# \_\_\_\_\_  
Deposit: \_\_\_\_\_ Ck# \_\_\_\_\_

## RENTAL APPLICATION

### PLEASE TELL US ABOUT YOURSELF

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Initial: \_\_\_\_\_ Jr/Sr/2<sup>nd</sup>: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Pets (Number, Kind & Name): \_\_\_\_\_

### PLEASE GIVE YOUR RESIDENCE HISTORY

Current Address \_\_\_\_\_  
Month & Year Moved In \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Present Landlord \_\_\_\_\_ Phone \_\_\_\_\_ Rent \$ \_\_\_\_\_  
Previous Address \_\_\_\_\_  
Date Moved In \_\_\_\_\_ Date Moved Out \_\_\_\_\_ Reason \_\_\_\_\_  
Landlord \_\_\_\_\_ Phone \_\_\_\_\_ Rent \$ \_\_\_\_\_  
Previous Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

### PLEASE GIVE YOUR EMPLOYMENT INFORMATION

Current Employer \_\_\_\_\_ Length of Employment \_\_\_\_\_  
Address \_\_\_\_\_  
Employer Phone # \_\_\_\_\_ Employer Fax # \_\_\_\_\_ Supervisor \_\_\_\_\_  
Position Held \_\_\_\_\_ Salary \$ \_\_\_\_\_ per \_\_\_\_\_  
Previous Employer \_\_\_\_\_ Length of Employment \_\_\_\_\_  
Address \_\_\_\_\_  
Employer Phone # \_\_\_\_\_ Employer Fax # \_\_\_\_\_ Supervisor \_\_\_\_\_  
Position Held \_\_\_\_\_ Salary \$ \_\_\_\_\_ per \_\_\_\_\_  
Additional Income Amount: \$\$ \_\_\_\_\_ per \_\_\_\_\_ Source \_\_\_\_\_

### PLEASE LIST YOUR BANK INFORMATION

Your Bank \_\_\_\_\_ Type of Account \_\_\_\_\_ Number \_\_\_\_\_  
Your Bank \_\_\_\_\_ Type of Account \_\_\_\_\_ Number \_\_\_\_\_

### VEHICLE INFORMATION

Your Driver's License Number \_\_\_\_\_ State \_\_\_\_\_

Vehicle Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ Tag # \_\_\_\_\_ State \_\_\_\_\_  
Vehicle Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ Tag # \_\_\_\_\_ State \_\_\_\_\_

**APARTMENT OCCUPANTS**

Occupant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Occupant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Occupant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Occupant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**OTHER INFORMATION**

Have you ever: 1. Filed for bankruptcy? \_\_\_\_\_ Yes \_\_\_\_\_ No  
2. Been evicted from tenancy? \_\_\_\_\_ Yes \_\_\_\_\_ No  
3. Willfully or intentionally refused to pay rent? \_\_\_\_\_ Yes \_\_\_\_\_ No  
4. Have you ever pled "guilty", "no contest" or been convicted of a crime? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please give any additional information which might help management evaluate this application:

\_\_\_\_\_

**IN CASE OF AN EMERGENCY**

Notify \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Relationship \_\_\_\_\_

I, the undersigned, hereby make application to lease apartment # \_\_\_\_\_ for a period of 12 months. I hereby tender a non-refundable fee of \$40.00 per person for processing this application. I represent that the information set forth on the application is true and complete; and hereby authorize verification of any and all of the information set forth above, including a consumer credit report ofr other such information as may be required to evaluate this application. The credit check and other such information becomes the sole possession of Essex Place and no copy will be given to the applicant. Any Fraudulent information on this application will be grounds for denial and should information be discovered after lease execution it will be grounds for evictions.

In consideration for an earnest money deposit of \$100.00, Management agrees to reserve an apartment for the Applicant. Upon acceptance of the \$100.00, the Applicant agrees to return the completed application/applications within 72 hours and understands that the Applicant has **3 of our business days from the time the \$100.00 deposit is left** to request their \$100.00 deposit be returned to them. The Applicant agrees to execute a lease and pay the balance of the security deposit within three business days. Should the Applicant fail to perform his/her obligations as stated herein, the deposit shall be retained by Management in consideration of reserving said apartment. In the event this application is not approved by Management, said deposit shall be refunded. In the event the apartment is not ready for occupancy by said date, the Applicant shall have the option of extending his/her reservation or requesting a refund of the deposit money paid hereunder. Applications are subject to approval of the Management Company. No oral agreements have been made.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Application Received By: \_\_\_\_\_ Date \_\_\_\_\_

**ESSEX PLACE**  
1317 East Street  
New Britain, CT 06053  
(860) 225-2525  
fax (860) 223-7549

# REQUEST FOR EMPLOYMENT VERIFICATION

TO \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VIA:  MAIL  
 FAX  
 PHONE

DATE: \_\_\_\_\_

The person named below has applied for an apartment rental with us. Your firm was listed as having currently or formerly employed this person. The applicant, by his/her signature below, has authorized you to release their employment information. Your assistance in providing employment information will be sincerely appreciated. Thank you.

RE: Employee Name \_\_\_\_\_  
Current Address \_\_\_\_\_  
Social Security Number \_\_\_\_\_  
Department or Branch \_\_\_\_\_  
Date(s) of Employment \_\_\_\_\_

REQUEST SUBMITTED BY:	TITLE:	PHONE:
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<b>APPLICANT'S AUTHORIZATION OF THIS INQUIRY:</b> I hereby consent to the release of my employment information.	
_____ Employee's Signature	_____ Date

<b>EMPLOYER'S COMMENTS</b>		
Dates of Employment: from _____ to _____ Salary \$ _____ Week/Month/Hour		
Position Held _____ If hourly, number of hours worked per week _____		
Other comments: _____		
SIGNATURE _____	TITLE _____	DATE _____

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# REQUEST FOR RESIDENCY VERIFICATION

TO \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VIA:  MAIL  
 FAX  
 PHONE

DATE: \_\_\_\_\_

The person named below has applied for an apartment rental with us. You were listed as having rented to the applicant. The applicant, by his/her signature below, has authorized you to release information about prior residency. Your comments or recommendation on this matter will be sincerely appreciated. We will be pleased to reciprocate this favor in the future. Thank you.

RE: Resident's Name \_\_\_\_\_  
Occupancy Address \_\_\_\_\_  
\_\_\_\_\_

REQUEST SUBMITTED BY:	TITLE:	PHONE:
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<b>APPLICANT'S AUTHORIZATION OF THIS INQUIRY:</b> I hereby consent to the release of my residency information.	
_____ Resident's Signature	_____ Date

<b>PROPERTY OWNER'S OR MANAGEMENT AGENT'S COMMENTS</b>			
Date Moved In _____	Date Moved Out _____	Still is an Occupant? _____	
Amount of Monthly Rent \$ _____	Utilities Included _____		
Rent Generally Paid:	<input type="checkbox"/> On Time	<input type="checkbox"/> Occasionally Late	<input type="checkbox"/> Often Late
Housekeeping Habits:	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Would you rent to this person again?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
SIGNATURE _____	TITLE _____	DATE _____	

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# REQUEST FOR BANK DEPOSIT VERIFICATION

TO \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VIA:  MAIL  
 FAX  
 PHONE

DATE: \_\_\_\_\_

The person named below had applied for an apartment rental with us. The applicant, by his/her signature below, has authorized you to release their banking information. Your assistance in providing deposit information will be sincerely appreciated. Thank you.

RE: Name: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
Social Security Number \_\_\_\_\_  
Department or Branch \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Checking Account # \_\_\_\_\_  
Savings Account # \_\_\_\_\_

REQUEST SUBMITTED BY:	TITLE:	PHONE:
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<b>APPLICANT'S AUTHORIZATION OF THIS INQUIRY:</b> I hereby consent to the release of my employment information.	
Employee's Signature _____	Date _____

<b><u>For Bank Use Only</u></b>		
Type of Account _____	Date Opened _____	
Present Balance _____	Are Regular Deposits Made? _____	
Type of Account _____	Date Opened _____	
Present Balance _____	Are Regular Deposits Made? _____	
Number of Overdrafts _____		
Signature _____	Title _____	Date _____